

ANZON

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CITY OF IRVINE  
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FEB - 5 2013

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT

**STATEMENT OF ECONOMIC INTERESTS**  
**COVER PAGE**

Please type or print in ink.

NAME OF FILER (LAST) CHOI (FIRST) STEVEN (MIDDLE) \_\_\_\_\_

**1. Office, Agency, or Court**

Agency Name  
CITY OF IRVINE  
Division, Board, Department, District, if applicable  
CITY COUNCIL  
Your Position  
MAYOR

► If filing for multiple positions, list below or on an attachment.

Agency: SEE ATTACHED Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction)  
☐ Multi-County \_\_\_\_\_ ☐ County of \_\_\_\_\_  
☒ City of IRVINE ☐ Other \_\_\_\_\_

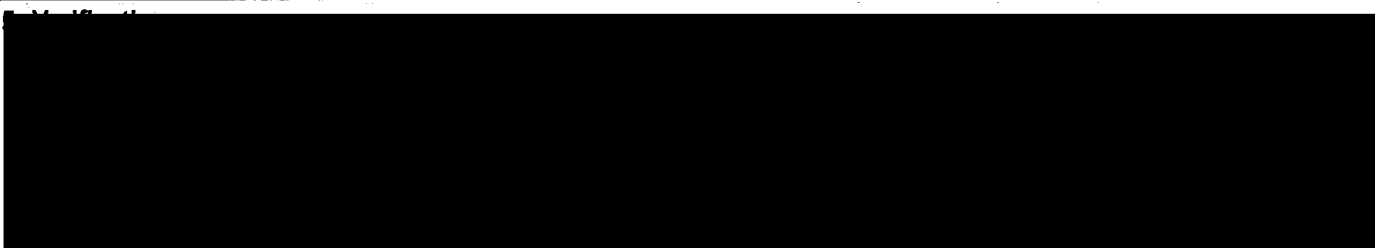
**3. Type of Statement (Check at least one box)**

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.  
-or-  
The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2012.  
☒ Assuming Office: Date assumed 01/08/2013  
☐ Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_  
☒ Leaving Office: Date Left 01/08/2013  
(Check one)  
☒ The period covered is January 1, 2012, through the date of leaving office.  
☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

**4. Schedule Summary**

Check applicable schedules or "None."  
☐ Schedule A-1 - Investments - schedule attached  
☒ Schedule A-2 - Investments - schedule attached  
☒ Schedule B - Real Property - schedule attached  
☐ Schedule C - Income, Loans, & Business Positions - schedule attached  
☐ Schedule D - Income - Gifts - schedule attached  
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached  
-or-  
☐ None - No reportable interests on any schedule

► Total number of pages including this cover page: 6



herein and in any attached schedules is true and complete. I acknowledge that I am aware of the penalties for providing false information.  
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2/4/13  
(month, day, year)

**EXPANDED STATEMENT**  
**Mayor Steven Choi**

**Attachment to Form 700**  
**2012 Annual Filing**

Following is a list of agencies I am a boardmember of as Councilmember of the City of Irvine:

- 1) Irvine City Council (Councilmember)
- 2) Irvine Industrial Development Authority
- 3) Irvine Public Facilities and Infrastructure Authority
- 4) Orange County Great Park Corporation
- 5) Orange County Sanitation District
- 6) Irvine Successor Agency to the dissolved Redevelopment Agency

**Attachment to Form 700**  
**Leaving Office Filing**

- 1) Orange County Vector Control District Board (Leaving Office 1/8/13)

**Attachment to Form 700**  
**Assuming Office Filing**

- 1) ✓ Southern California Association of Governments Regional Council (Delegate) (Assuming Office 1/8/13)
- 2) Orange County Council of Governments (Delegate) (Assuming Office 1/8/13)
- 3) Foothill/Eastern Transportation Corridor Agency (Alternate) (Assuming Office 1/8/13)
- 4) San Joaquin Hills Transportation Corridor Agency (Alternate) (Assuming Office 1/8/13)
- 5) Transportation Corridor System Board of Directors (Alternate) (Foothill/Eastern and San Joaquin Hills Transportation Corridor Agencies) (Assuming Office 1/8/13)
- 6) Orange County Fire Authority (Alternate) (Assuming Office 1/8/13)

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <b>STEVEN CHOI</b>

**1. BUSINESS ENTITY OR TRUST**

Name **Dr. Choi's Academy**  
Address (Business Address Acceptable) **499 Campus Dr. #11 Irvine, CA**

Check one  
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
**Tutoring**

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$0 - \$1,999 ☐ / / 12 ☐ / / 12  
☒ \$2,000 - \$10,000 ☐ ACQUIRED ☐ DISPOSED  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Partnership ☐ Sole Proprietorship ☒ Inc. Other  
YOUR BUSINESS POSITION **president**

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499 ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000 ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)**

☐ None

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
☐ INVESTMENT ☒ REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  
**Dr. Choi's Academy**  
**Tutoring**

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☒ \$2,000 - \$10,000 ☐ / / 12 ☐ / / 12  
☐ \$10,001 - \$100,000 ☐ ACQUIRED ☐ DISPOSED  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INTEREST  
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership  
☐ Leasehold ☒ Other **Sub-leasee of Kumon**  
Yrs. remaining **1.5**

☐ Check box if additional schedules reporting investments or real property are attached

**1. BUSINESS ENTITY OR TRUST**

Name **Kumon Math & Reading Ctr**  
Address (Business Address Acceptable) **4616 Barranca, Irvine, CA 92604**

Check one  
☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$0 - \$1,999 ☐ / / 12 ☐ / / 12  
☐ \$2,000 - \$10,000 ☐ ACQUIRED ☐ DISPOSED  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Partnership ☐ Sole Proprietorship ☒ Inc. Other  
YOUR BUSINESS POSITION **Spouse of president**

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499 ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000 ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)**

☐ None

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
☐ INVESTMENT ☒ REAL PROPERTY

Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  
**Kumon Math & Reading Ctr.**  
**After-School Learning-Tutoring**

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$2,000 - \$10,000 ☐ / / 12 ☐ / / 12  
☐ \$10,001 - \$100,000 ☐ ACQUIRED ☐ DISPOSED  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INTEREST  
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership  
☒ Leasehold **1.5** ☐ Other  
Yrs. remaining

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
**STEVEN S. Choi**

**1. BUSINESS ENTITY OR TRUST**

**Kumon Math & Reading Ctr.**  
Name  
**4499 Campus Dr. # H, Irvine, CA**  
Address (Business Address Acceptable)

Check one  
☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
**After-school Learning-Tutoring**

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Partnership ☐ Sole Proprietorship ☒ Inc.  
Other

YOUR BUSINESS POSITION **Spouse of President**

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499 ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000 ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

☐ None

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
☐ INVESTMENT ☒ REAL PROPERTY

**Kumon Reading & Reading Ctr.**  
Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property  
**After-school Learning-Tutoring**  
Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INTEREST  
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership  
☒ Leasehold **.6** Yrs. remaining ☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

**1. BUSINESS ENTITY OR TRUST**

**New Era Academy, Inc**  
Name  
**4616 Barranca, Irvine, CA**  
Address (Business Address Acceptable)

Check one  
☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**  
**After-school Learning-tutoring**

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Partnership ☐ Sole Proprietorship ☒ Inc.  
Other

YOUR BUSINESS POSITION **Spouse of President**

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499 ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000 ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

☐ None

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
☐ INVESTMENT ☒ REAL PROPERTY

**New Era Academy, Inc**  
Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property  
**New Era Academy, Inc**  
Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INTEREST  
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership  
☒ Leasehold **1.5** Yrs. remaining ☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
Steven S. Choi

**1. BUSINESS ENTITY OR TRUST**

Name Choi Family Living Trust  
36 Grassland, Irvine, CA  
Address (Business Address Acceptable)

Check one  
☒ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$0 - \$1,999 ☐ / / 12  
☐ \$2,000 - \$10,000 ☐ / / 12  
☐ \$10,001 - \$100,000 ☐ ACQUIRED ☐ DISPOSED  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Partnership ☐ Sole Proprietorship ☐ Other

YOUR BUSINESS POSITION \_\_\_\_\_

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499 ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000 ☐ OVER \$100,000  
☒ \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

☐ None  
Young Suk Kang

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
☐ INVESTMENT ☒ REAL PROPERTY

36 Grassland, Irvine, CA  
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property.  
Rent

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$2,000 - \$10,000 ☐ / / 12  
☐ \$10,001 - \$100,000 ☐ / / 12  
☐ \$100,001 - \$1,000,000 ☐ ACQUIRED ☐ DISPOSED  
☒ Over \$1,000,000

NATURE OF INTEREST  
☒ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership  
☐ Leasehold \_\_\_\_\_ Yrs. remaining ☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

**1. BUSINESS ENTITY OR TRUST**

Name \_\_\_\_\_  
Address (Business Address Acceptable) \_\_\_\_\_

Check one  
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$0 - \$1,999 ☐ / / 12  
☐ \$2,000 - \$10,000 ☐ / / 12  
☐ \$10,001 - \$100,000 ☐ ACQUIRED ☐ DISPOSED  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Partnership ☐ Sole Proprietorship ☐ Other

YOUR BUSINESS POSITION \_\_\_\_\_

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

☐ \$0 - \$499 ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000 ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

☐ None

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
☐ INVESTMENT ☐ REAL PROPERTY

\_\_\_\_\_  
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or City or Other Precise Location of Real Property

FAIR MARKET VALUE IF APPLICABLE, LIST DATE:  
☐ \$2,000 - \$10,000 ☐ / / 12  
☐ \$10,001 - \$100,000 ☐ / / 12  
☐ \$100,001 - \$1,000,000 ☐ ACQUIRED ☐ DISPOSED  
☐ Over \$1,000,000

NATURE OF INTEREST  
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership  
☐ Leasehold \_\_\_\_\_ Yrs. remaining ☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Steven S. Choi

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

12 Henna  
CITY Irvine, CA 92618

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☒ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

NATURE OF INTEREST

- ☐ Ownership/Deed of Trust      ☐ Easement  
☐ Leasehold \_\_\_\_\_  
Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

Mazen Khondari, Hadia  
Khondari, Azeez Maliky

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

214 Kensington Park  
CITY Irvine, CA 92606

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

NATURE OF INTEREST

- ☒ Ownership/Deed of Trust      ☐ Easement  
☐ Leasehold \_\_\_\_\_  
Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

☐ None

Jennifer Dunkle

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

☐ Guarantor, if applicable

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments: \_\_\_\_\_

AMENDMENT

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

FAIR POLITICAL  
PRACTICES COMMISSION

COVER PAGE

RECEIVED  
CITY OF IRVINE  
CITY CLERK DEPT.

2013 MAR -8 AM 7:49

Please type or print in ink.

NAME OF FILER (LAST) 2013 APR -8 PM 12:54 (FIRST) (MIDDLE)  
Choi Steven S

**1. Office, Agency, or Court**

Agency Name

CITY OF IRVINE

Division, Board, Department, District, if applicable

Your Position

City Council

Mayor

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

- ☐ State ☐ Judge or Court Commissioner (Statewide Jurisdiction)  
☐ Multi-County \_\_\_\_\_ ☐ County of \_\_\_\_\_  
☒ City of IRVINE ☐ Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

- ☒ **Annual:** The period covered is January 1, 2012, through December 31, 2012.  
-or-  
The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2012.  
☐ **Leaving Office:** Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)  
☐ The period covered is January 1, 2012, through the date of leaving office.  
☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.  
☐ **Assuming Office:** Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_  
☐ **Candidate:** Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

- ☐ **Schedule A-1 - Investments** - schedule attached ☐ **Schedule C - Income, Loans, & Business Positions** - schedule attached  
☐ **Schedule A-2 - Investments** - schedule attached ☐ **Schedule D - Income - Gifts** - schedule attached  
☐ **Schedule B - Real Property** - schedule attached ☒ **Schedule E - Income - Gifts - Travel Payments** - schedule attached  
-or-  
☐ **None - No reportable interests on any schedule**

herein and in any attached schedules is true and complete. I acknowledge

I certify under penalty of perjury under the laws of the State of California

Date Signed 03/07/2013  
(month, day, year)

**EXPANDED STATEMENT**  
**Mayor Steven Choi**

**Attachment to Form 700**  
**2012 Annual Filing**

Following is a list of agencies I am a boardmember of as Councilmember of the City of Irvine:

- 1) Irvine City Council (Councilmember)
- 2) Irvine Industrial Development Authority
- 3) Irvine Public Facilities and Infrastructure Authority
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- 5) Orange County Sanitation District
- 6) Irvine Successor Agency to the dissolved Redevelopment Agency

**Attachment to Form 700**  
**Leaving Office Filing**

- 1) Orange County Vector Control District Board (Leaving Office 1/8/13)

**Attachment to Form 700**  
**Assuming Office Filing**

- 1) Southern California Association of Governments Regional Council (Delegate) (Assuming Office 1/8/13)
- 2) Orange County Council of Governments (Delegate) (Assuming Office 1/8/13)
- 3) Foothill/Eastern Transportation Corridor Agency (Alternate) (Assuming Office 1/8/13)
- 4) San Joaquin Hills Transportation Corridor Agency (Alternate) (Assuming Office 1/8/13)
- 5) Transportation Corridor System Board of Directors (Alternate) (Foothill/Eastern and San Joaquin Hills Transportation Corridor Agencies) (Assuming Office 1/8/13)
- 6) Orange County Fire Authority (Alternate) (Assuming Office 1/8/13)



**SCHEDULE E**  
**Income – Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name Steven S. Choi

- You must mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE (Not an Acronym) The Energy Coalition	
ADDRESS (Business Address Acceptable) 15615 Alton Pkwy, Ste 450	
CITY AND STATE Irvine, CA	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input checked="" type="checkbox"/> 501 (c)(3)
Community Energy Partnership	
DATE(S): 05/25/12 - 05/31/12	AMT: \$ 3,696.40
(If gift)	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
<input type="checkbox"/> Made a Speech/Participated in a Panel	
<input checked="" type="checkbox"/> Other - Provide Description	
Meeting with government and energy related entities.	
Airfare - \$1656.40, Lodging - \$1690.00, Meals - \$350.	

▶ NAME OF SOURCE (Not an Acronym)	
ADDRESS (Business Address Acceptable)	
CITY AND STATE	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input type="checkbox"/> 501 (c)(3)
DATE(S): ____/____/____ - ____/____/____	AMT: \$ ____
(If gift)	
TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income	
<input type="checkbox"/> Made a Speech/Participated in a Panel	
<input type="checkbox"/> Other - Provide Description	

▶ NAME OF SOURCE (Not an Acronym)	
ADDRESS (Business Address Acceptable)	
CITY AND STATE	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input type="checkbox"/> 501 (c)(3)
DATE(S): ____/____/____ - ____/____/____	AMT: \$ ____
(If gift)	
TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income	
<input type="checkbox"/> Made a Speech/Participated in a Panel	
<input type="checkbox"/> Other - Provide Description	

▶ NAME OF SOURCE (Not an Acronym)	
ADDRESS (Business Address Acceptable)	
CITY AND STATE	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input type="checkbox"/> 501 (c)(3)
DATE(S): ____/____/____ - ____/____/____	AMT: \$ ____
(If gift)	
TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income	
<input type="checkbox"/> Made a Speech/Participated in a Panel	
<input type="checkbox"/> Other - Provide Description	

Comments: \_\_\_\_\_